JOINT COMMUNIQUE

HIGH-LEVEL EMERGENCY MINISTERIAL MEETING ON CHOLERA EPIDEMICS AND CLIMATE-RELATED PUBLIC HEALTH EMERGENCIES

WE, the Ministers for Health, Water and Sanitation, and Environment from the African Union (AU) Member States as well as heads of delegations that attended the high-level ministerial meeting on “Cholera epidemics and Climate related public health emergencies” held in Lilongwe, Malawi, 9-10 March 2023.

RECALLING the existing frameworks, protocols, declarations, strategies, and agreements, including inter-alia:

- The Constitutive Act of the African Union (2000);
- The World Health Organisation, International Health Regulations (2005);
- The African Union Declaration on Accelerating Implementation of the International Health Regulations in Africa (2017);
- The Global Task Force on Cholera Control (GTFCC): Ending Cholera a Global Roadmap to 2030 (2017);
- The Agreement Establishing the African Continental Free Trade Agreement (2018);
- The World Health Organisation Ending Cholera: A Global Road Map to 2030 (2018);
- The SADC Hygiene Strategy 2021-2025 (2020);
- The World Health Organisation African Region’s Regional Strategy for Health Security and Emergencies, 2022-2030 (2022);
- The Global MOU between UNICEF and WHO in Health Emergency Preparedness, Response and Resilience (2022-2027)
- The Statute of the Africa Centres for Disease Control and Prevention (2022);
• The Joint Emergency Preparedness and Response (EPR) Action Plan (JEAP) between the Africa CDC and the World Health Organisation (AFRO and EMRO) (2022)

NOTING WITH CONCERN the ongoing multi-country outbreaks of Cholera, other water borne diseases, and climate-related public health emergencies in Africa and the continued risk for cross-border transmission; further noting that 56% of health events reported between 2001 and 2021 are climate related and the events are on the rise;

AWARE that without concerted efforts now, the milestones and targets in the global and regional strategies and frameworks to eliminate Cholera epidemics in Africa by 2030 may be missed;

RECOGNIZING that Cholera, other water borne disease outbreaks, and climate-related public health emergencies negatively impact health and economic security of the people of Africa and hence there is an urgent need to address these threats by all AU Member States;

CONCERNED that the current coverage of water, sanitation access and hygiene behaviours within Sub-Saharan Africa is low, with 35% of the population without access to at least basic water service level (protected water points) and 67% without access to at least basic sanitation (a family latrine/toilet, not shared) in 2020, according to a UNICEF and WHO Joint Monitoring Programme.

CONVINCED that there is an urgent need to initiate and/or enhance preparedness, readiness and coordinated response for Cholera epidemics, and other water borne and climate related public health emergencies in border areas and within respective national boundaries especially at cross-border hotspots of Member States, including the need for a coordinated regional and sub-regional approach to prepare for and rapidly effectively respond to any cholera epidemics;

NOTING the need for robust joint monitoring of cross-border actions under the joint coordination of the Africa Centres for Disease Control and Prevention (Africa CDC), and the WHO’s Regional Office for Africa (AFRO) and Eastern Mediterranean (EMRO), UNICEF, the Global Task Force on Cholera Control (GTFCC) and other relevant partners;

COMMENDING the leadership of Malawi, WHO, Africa CDC, UNICEF and other partners for organising this high-level ministerial meeting on Cholera and Climate-related public health emergencies;

COLLECTIVELY, COMMIT TO:

1. Undertake urgent actions to facilitate cooperation and collaboration amongst AU Member States for cholera, and climate-related public health emergency preparedness, readiness, response, recovery, and sustainable control, including:
   a. Identifying and implementing priorities for bolstering resilience building, preparedness, readiness, response capacity and maintenance in all high-risk countries.
   b. Enhancing all-inclusive engagement of national stakeholders at all levels to set a multi-sectoral response implementation in particular: improve and maintain access to sustainable basic water sanitation and hygiene, improve and maintain timely access to quality health services including at community level, early detection, and
surveillance capacities, including strengthening of laboratories and genomic surveillance capabilities, improved systems for sharing and coordination.

c. Creating an enabling environment that supports the local manufacturing of oral cholera vaccines to achieve vaccine self-sufficiency in Africa.

d. Fast-tracking the effective implementation and financing of the National/Annual Cholera Plans developed by countries to meet the target set by GTFCC “Ending Cholera: A Global Roadmap to 2030”; as well as mobilise financial resources for other public health emergencies.

e. Improving effective engagement of affected and hot spot communities in detecting, preventing, and controlling outbreaks and designing and maintaining effective community-based sustainable control strategy.

f. Improving cross-border collaboration across pillars including RCCE and timely surveillance and WASH data-sharing for public health action.

g. Building workforce capacity across response pillars, including joint training, exchange learning and benchmarking visits, strengthening of capacity for information analysis, operational research, interpretation, and simulation exercises leveraging the expertise of key multisectoral partners involved in cholera prevention, preparedness, and response.

h. Sharing technical expertise and other resources and assets necessary for eliminating cholera and controlling climate-related public health emergencies in Africa.

i. Enhancing cross-border joint planning and implementation of cholera preparedness, response, and recovery activities, including risk communication and community engagement in hotspots.

j. Monitoring the movement of people across national borders in accordance with the International Health Regulations (2005) to limit the international spread of disease without interfering with travel and trade.

k. Establishing agile and timely legal/regulatory processes/frameworks and logistics planning for rapid cross-border deployment and receipt of public health experts, as well as experts across WASH and the climate-related domains, and medical personnel for cholera and other public health emergency response including agreements to waive regulatory fees for emergency medical personnel supporting public health emergency response.

l. Defining attainable SDG 6 Water and Sanitation milestones combined with investments (i.e., at least 70% basic water and 50% basic sanitation service levels) before the target year of 2030 in cognizance of the transformative effect of WASH on public health, economies, gender equality, and societies, particularly in the face of climate change.

m. Sustaining high-level political will and commitment to prioritize and fund actions to address the underlying causes of cholera in the region through longer-term investment in the WASH infrastructure, services, and behaviors, essential for the preventing cholera and other climate-related health emergencies.
Mainstreaming health emergencies and its financing into ongoing climate change deliberations at global, regional, and national levels; and simultaneously work closely with the Ministries of Environment, climate change experts and related multilateral institutions to better integrate weather forecasting, climatology and other environmental sciences into emergency preparedness and response planning.

2. Establishing the Africa Elimination of Cholera Epidemics Coordination Task Force (AECECT), hosted at the African Union secretariat in Addis Ababa, Ethiopia, under the leadership of the Member States with support from the Africa CDC, WHO, UNICEF, GTFCC and other relevant partners to support the cooperation and collaboration described above while maintaining full coherence with the Ending Cholera a Global Roadmap to 2030. Whilst the AECECT maintains political oversight through the AU institutional arrangements, the GTFCC will facilitate technical support through the WHO technical coordination platforms based at the WHO hubs in collaboration with Africa CDC, UNICEF, and relevant partners.

3. Exchanging information in a timely manner on matters of common interest as deemed appropriate for prevention, preparedness, and response, while acknowledging that withholding of, or falsification of, public health emergency data and information violates the IHR and threatens peace, security, and prosperity of the AU Member States.

4. Implementing National Cholera Plans, roadmaps and strategies developed following this high-level meeting and annually share progress reports.

5. Strengthening multisectoral corporation and coordination with relevant sectors including the climate sector to enhance the implementation of mitigation measures aimed at reducing health risks of climate sensitive diseases.

INVITE the Africa CDC, WHO (African Region – AFRO and Eastern Mediterranean Region - EMRO), UNICEF, GTFCC and partners to:

1. Jointly facilitate and support Member States as needed, to establish the Africa Elimination of Cholera Epidemics Coordination Task Force to provide oversight in strengthening Member States' preparedness, readiness, and response capabilities to eliminate cholera epidemics and mitigate the impact of climate related public health emergencies in Africa.

2. Support AU Member States to formulate national cholera plans (NCP) aligned with the GTFCC strategy with robust monitoring and evaluation frameworks to measure progress toward achieving national, regional, and global milestones and targets.

3. Utilise this Communiqué to elevate the current cholera crisis in the global landscape ahead of the United Nations 2023 Water Conference.

4. Jointly convene a high-level ministerial meeting in 2025 for Member states to report progress in achieving the country roadmaps and plans.

THANK His Excellency Dr Lazarus McCarthy Chakwera, President of the Republic of Malawi and His Excellency Hakainde Hichilema, President of the Republic of Zambia, and Global Cholera Control Champion, for their leadership in the efforts to eliminate Cholera Epidemics in Africa by 2030.

RESOLVED THIS 10TH DAY OF MARCH 2023, IN LILONGWE, MALAWI